PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

01 4110 40 5" 55 55 5												
_	•			S FILED - PART I		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
Ľ	OTAL CLAIM	S 						RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			rn	rninus 20=		•		X\$ 9=		OR.	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		•			X43=		OR	X86=	
M	ULTIPLE DEPE	ENDENT CLAIM F	RESENT				•	+145=		OR		
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	 	OR	L	
3	3-15-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL E	
AMENDMENT A	D	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	. 69	Minus	- 10	2	= -		X\$ 9=		OR	X\$18=	
AM	Independent	* 7 ENTATION OF M	Minus	PENIDENT	8			X43=		OR	X86=	
<u> </u>			·	PENDLIN	CLANV		1	+145=		OR	+290=	
,	مر ا				·		-	TOTAL		OR	TOTAL ADDIT, FEE	
	1-5-05	(Column 1)		(Colum		(Column 3)				_		
AMENDMENT B	E	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.105	Minus	10	2	= 3		75 X\$8=	75	OR	X\$18=	
	Independent FIRST PRESE	* 19 NTATION OF MI	Minus	ennent (CLAIM	=		X43=	100	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	-
							A	TOTAL DDIT. FEE	175	OR ,	TÖTAL ADDIT. FEE	
1		(Column 1)		(Columi		(Column 3)				_		
MEN	•	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	<u>*</u>	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=	·	OR	X86=	
	FIRST PRESE	\vdash	+145=			+290=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
11	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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credit Card Type:	Vise MesterCerd	E	American Express	Discover								
Credit Card Account #:												
Credit Card Expiration Date: 07/2007												
Name as it Appears on Credit Card: Andrew L. DiRienzo												
Payment Amount: \$ (US Dollars): 885,00												
	dues King		Date: 10/08/2004	- see the asympto of a fee								
Cardholder Signature Refund Policy: The Ciffice may refund a tea paid by midpate or in durant of that required. A change of purpose after the payment of a fee section of purpose after the payment of a fee will not entitle a party to a refund is specifically requested, will not entitle a party to a refund of such the. The office will not refund of a fee paid by credit card will be issued as a credit to the oradit and will not notify the payor of such amounts (37 OFR § 1.28). Refund of a fee paid by credit card will be issued as a credit or changed.												
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Street Address 1: 118 Weaver Road												
Street Address 2:												
City: Elizaville												
State/Province: New York Zip/Postal Code: 12523												
Country: USA												
Daytime Phone #: 480-948-3295 Fax #: 480-948-3387												
Description of Request and Payment Information:												
Three-month extens	ion of time and RCE fee		•									
Patent Fee	Patent Maintenance Fee		ademark Fee	Other Fee								
Application No.	Application No.	Applica	tion No.	IDON Customer Na.								
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Patent Mo.	Patent No.	Regist	ration No.	8888								
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04/19/2005 EWILLIAM